

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 713009

**FILED  
May 20, 2022  
Secretary of State  
1275676527CC**

**Entity Name:** GIRLS INCORPORATED OF WINTER HAVEN

**Current Principal Place of Business:**

2400 HAVENDALE BLVD.  
WINTER HAVEN, FL 33881

**Current Mailing Address:**

PO BOX 7285  
WINTER HAVEN, FL 33883-7285 US

**FEI Number: 59-1158810**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

THRELKEL, MARGARET  
2400 HAVENDALE BLVD.  
WINTER HAVEN, FL 33881 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DIRECTOR  
Name DEWDNEY, TWANNA  
Address 128 PALMETTO AVENUE  
City-State-Zip: WINTER HAVEN FL 33881

Title DIRECTOR  
Name HULVERSON, KIM  
Address 3670 HAVENDALE BLVD.  
City-State-Zip: WINTER HAVEN FL 33881

Title DIRECTOR  
Name MORACO, SUZIE  
Address 229 LAKE HARTRIDGE DRIVE N  
City-State-Zip: WINTER HAVEN FL 33880

Title DIRECTOR  
Name HUNDLEY, MARY BETH  
Address 20 THIRD STREET SW  
SUITE 308  
City-State-Zip: WINTER HAVEN FL 33880

Title DIRECTOR  
Name LUXFORD, BETH  
Address 373 NIBLICK CIRCLE  
City-State-Zip: WINTER HAVEN FL 33881

Title PRESIDENT  
Name SEXSON, AMY  
Address 154 2ND STREET SW  
#7  
City-State-Zip: WINTER HAVEN FL 33881

Title DIRECTOR  
Name BIRDSONG, ANN  
Address 2417 MARY JEWETT CIRCLE  
City-State-Zip: WINTER HAVEN FL 33881

Title SECRETARY  
Name FASKING, JENNIFER  
Address 218 RUBY LAKE LANE  
City-State-Zip: WINTER HAVEN FL 33884

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: AMY SEXSON**

**PRESIDENT**

**05/20/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           TREASURER  
Name           MYERS, MARY MARGARET  
Address        3545 LAKE ALFRED ROAD  
City-State-Zip: WINTER HAVEN FL 33881

Title           DIRECTOR  
Name           POLSTON, LYNN  
Address        767 CYPRESS GARDENS BLVD.  
City-State-Zip: WINTER HAVEN FL 33880

Title           DIRECTOR  
Name           SPAULDING, APRIL  
Address        P. O. BOX 503  
City-State-Zip: LAKE HAMILTON FL 33851

Title           DIRECTOR  
Name           REUTER, HEATHER  
Address        P. O. BOX 2277  
City-State-Zip: WINTER HAVEN FL 33883

Title           DIRECTOR  
Name           WHITEHEAD VENTERS, WENDY  
Address        601 6TH STREET SW  
City-State-Zip: WINTER HAVEN FL 33880

Title           VP  
Name           RICH, CARMAN  
Address        250 3RD STREET NW  
                  102  
City-State-Zip: WINTER HAVEN FL 33881

Title           DIRECTOR  
Name           POPE, JANA  
Address        2400 HAVENDALE BLVD.  
City-State-Zip: WINTER HAVEN FL 33881

Title           DIRECTOR  
Name           BURNEY, PRIMA  
Address        502 E. MAIN STREET  
City-State-Zip: LAKELAND FL 33801

Title           DIRECTOR  
Name           WEAVER, PAIGE  
Address        2521 THORNHILL ROAD  
City-State-Zip: AUBURNDALE FL 33823

Title           DIRECTOR  
Name           WILLIAMS, PATRICE  
Address        411 ST. GEORGES CIRCLE  
City-State-Zip: EAGLE LAKE FL 33839